

The Dental Assistant

*Editorial of the American
Dental Assistant*



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1934 Resolutions

In case you haven't thought of any resolutions for the New Year, here are a few to think about on January 1st. If you can't keep all of them, do stick to a few.

I promise myself:—

"To be strong, that nothing can disturb my peace of mind.

To talk Health, Happiness and Prosperity.

To make all my friends realize there is something in each of them.

To look on the sunny side of everything and make my optimism come true.

To think only of the best, to work for the best, and to expect only the best.

To forget mistakes and failures of the past and to press on to greater achievements in the future.

To wear a cheerful countenance at all times and give every living creature I meet a smile.

To give so much time to improving myself that I will have no time to criticize others.

To be too big for worry, too noble for anger, too strong for fear, and too happy to permit the presence of trouble.

To think well of myself, and to proclaim this fact to the world, not in loud, boisterous words, but in charitable deeds and actions."

Sent in by **ROBINA A. McMurdo**, New York City.



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Sent in by ROBINA A. McMURDO, New York City.

Paul S. Dodge

The Dental Assistant

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Changes of address should be reported to us promptly in order to assure continued receipt of issues. Kindly notify us if the journal fails to reach you within 10 days of the first of the month, to assure prompt investigation of cause.

Surgical Cleanliness in Dentistry

By Dr. K. Paul Carson, Minneapolis, Minn.

(Read before the Minnesota D. H. & A. Assn. Feb. 8th, 1933)

SUCCESS in surgery embraces more than mere skill in matters pertaining to operative technique. Equally important are such factors as diagnosis, anesthesia, post-operative measures and surgical cleanliness. Surgical cleanliness may be defined as the absence of micro-organisms and other contaminations. This state is known as Asepsis. It requires no imagination to realize what a task it must be to establish and maintain such a condition during surgical procedures. When one considers that the responsibility of routine preparation in this connection rests chiefly with the assistant, hygienist or the nurse, it naturally follows that she must possess the necessary knowledge and training to carry on her work with precision, skill and constant adherence to the principles involved. In minor oral surgery it is obviously both impractical and unnecessary to attempt duplication of the extensive preparations and the rigid rules of asepsis maintained in hospital operating rooms, but it is possible and desirable to work out a simple and efficient system of surgical cleanliness adaptable to office practice. In order to devise such a plan of procedure, it is only necessary to compare major surgery with minor oral surgery, and to ascertain in what respects they are similar and how they differ from the standpoint of surgical principles.

For convenience in discussion, two factors, common both to major surgery and to mouth surgery, may be analyzed. These are:

1. Operative interference and
2. Conditions involved in surgery in relation to surgical cleanliness.

The former may be said to consist of two stages, anesthesia and operative technique. The rules governing the administration of anesthetics, whether general or local, are identical for all types of surgery and for that reason they must be managed accordingly. Fundamentally there is no difference between the local anesthetic used for the removal of an appendix and the one injected for the removal of a tooth. The same precautions must be taken in either case. Therefore it follows that in mouth surgery, performed under local anesthesia, it becomes necessary to follow the rules of strict asepsis during its administration, which means a sterile solution in a sterile syringe, equipped with a sterile needle, introduced through a sterile membrane into healthy tissue. There can be no deviation from this without the risk of injury to the patient as sepsis is the source of grave complications.

The second stage concerns itself with the actual operative technique. In major surgery, or wherever the deeper tissues of the body are involved, manipulation of the parts by the hands of the surgeon is almost always necessary, which is one of the reasons for strict asepsis in such cases. In minor oral surgery, digital manipulation of the operative field is quite unnecessary, should be avoided and only sterile instruments permitted to enter the wound. The second factor, common to both branches of surgery, deals with conditions involved in surgery in relation to surgical cleanliness. It is a well known fact that the oral cavity is at all times infested with micro-organisms, pathogenic and otherwise; that it is difficult to sterilize the cavity, even for short periods, and that the oral

secretions are only slightly antiseptic, if at all so. It is further known that, as a rule, the tissues of the oral cavity are immune to these organisms except when deep invasion takes place, particularly in the sub lingual region, in areas containing large cysts, tumors or deeply impacted teeth. Otherwise wounds heal readily in the mouth, while, in other parts of the body, wounds exposed to similar contamination invariably would become infected.

On what basis then can a practical and safe method of surgical cleanliness for mouth surgery be formulated? The discussion discloses no fundamental difference between major and minor surgery in the administration of local anesthetics. It does reveal a difference in matters pertaining to operative technique, and it also shows that as a rule, wounds in the mouth are only susceptible to the results of sepsis when the deeper structures are involved, particularly so in certain regions. The conclusions drawn from this comparison would indicate that in mouth surgery the highest degree of surgical cleanliness, asepsis, must obtain in the administration of local anesthetics in cases where the oral tissues are deeply invaded, and finally that a modified form is adequate for the simple extraction of teeth and for superficial surgical tasks in general.

In any endeavor, simplicity of a given system is conducive to efficiency in its application. Nowhere is this of greater importance than during a surgical operation, where uncertainty, delay, and error, may be the cause of serious consequences. A brief description on operating room equipment may therefore be of interest, beginning with the physical characteristics of the room itself. This should be well lighted, naturally as well as artificially. The floors and the walls should be free from rugs, hangings, pictures and other useless decorations, which only serve to complicate the problem of cleanliness. A tile or linoleum-covered floor

is easily kept clean. The modern dental chair is well suited for the purpose, especially if it is equipped with enamel head and arm rests, hard leather seat and back. The pedestal or unit type spittoon is preferable to the variety using rubber tubings. An all metal instrument cabinet, about 48 inches in height, with a broad glass or opalite top, drawers of from 3 to 6 inches in depth, is excellent for the storage of instruments, sterile packs of dressings, sponges and other accessories. The top of the cabinet will accommodate glass jars for convenient access to throat packs, fingersponges, cotton rolls, applicators, etc., and can also be used for the local anesthesia armamentarium in the preparation of solutions. A separate and smaller cabinet may be required for sheets and towels. The instrument table of choice is the so-called bedside table, which is adjustable in height, has a large, removable tray, which can be taken to the sterilization plant, covered with a sterile towel and all the instruments, for a given case, transferred to it directly from the sterilizer. This should be done before the patient enters the room, to avoid undesirable psychological effects, and also to give the instruments time to cool. The practice of selecting instruments from their storage places in the cabinet is not to be recommended as the habit necessarily causes delay and is apt to interrupt the continuity of surgical cleanliness. This applies to operations other than the simple extraction of teeth and the like. The dental engine commonly in use is not designed as a surgical unit, but is entirely satisfactory for the purpose if the handpiece be thoroughly cleansed with 70% alcohol, which is the percentage of its greatest germicidal power. In changing burs, it is well to use a piece of sterile gauze while tightening the chuck, to avoid contamination by parts not readily cleansed by the alcohol. An anesthesia apparatus, a small basin with 70%

alcohol for the hands, a washbowl with running hot and cold water, preferably with foot-controlled faucets and a waste receptacle completes the permanent fixtures of the operating room. Where a separate sterilization room is available, centralization of all work related to this department is of considerable advantage.

In office practice the patient's clothing is not removed, except insofar as same may interfere with comfort and respiration. The clothes should be covered with a clean sheet or rubber apron. Towels needed for each operation are sterilized in linen packs, four to each pack. One of these is draped about the patient's head, one for the chin and chest, one for the instrument tray and one for the operators' hands. Fingersponges, about two inches square, are made of gauze, throat packs are made of cotton and should be equipped with a string, six inches or longer, to prevent their loss in the patient's throat. Cotton rolls, one inch long, are better suited as sponges in small areas than are pellets made of loose cotton. Nasal applicators, in one end wound with a small ball of cotton, are to be preferred to pliers and cotton pellets for the topical application of germicidal agents. All of these accessories are sterilized in linen packs. For convenience in handling, a supply of each may be kept in covered glass jars on top of the instrument cabinet. The operator and the assistant prepare their hands by scrubbing them for a minute or two with soap and a sterile brush, after which they are immersed in a solution of 70% alcohol. Nothing but surgically clean objects should be touched after the hands have been so prepared. Should it become necessary to adjust the chair, the headlamp or the patient's clothing, the

hands should be immersed again in alcohol before the operation is resumed.

In conclusion it may be of interest to mention some of the reasons for post-operative complications which follow surgical procedures in the mouth. As a rule, these do not arise from causes inherent to the case itself and therefore beyond control, but can generally be traced to some fault in technique. Septic syringes, needles or solutions are the most common, more particularly following the deep injections. Reactions brought about through these sources may be mild and eventually resolve, but may also develop into deep-seated abscesses in regions adjacent to their placement. The first signs of infection appear in from four to eight days, is manifest by impaired function, gradually increasing pain, swelling and a rise in temperature. In these cases the operative field shows no signs of infection and the radiogram is generally negative. More immediate and severe reactions occur where the solution is injected into a septic area. Here early aggravation of the local symptoms takes place, the pain is more severe, the swelling greater and the systemic symptoms more marked. Some cases terminate fatally and in those which recover, extensive necrosis of both hard and soft tissues is common. In view of such serious possibilities, wherever surgical procedures are undertaken, it is clearly evident that surgical cleanliness is of the utmost importance and therefore places a great responsibility upon those who are charged with its painstaking requirements and who can receive no greater reward for work well done than the confidence and faith which is theirs to enjoy.



Some Nursing Principles

By Margaret Cooke, President, Portland (Oregon) D. A. Assn.

AS LONG as dental assistants wear uniforms they are going to be considered nurses; and if we are thought of as nurses, it is well for us to conduct ourselves according to the best standards of that profession.

There are certain principles that are taught wherever nurses are trained—principles that apply equally to home nursing, hospital nursing, or dental nursing. If we adopt these principles and keep them always in mind, we are bound to improve our own technique, help our dentists more efficiently, and bring respect to our whole profession. The first of these principles is never to do anything for a patient without explaining what you are about to do. It is not necessary to go into unpleasant details, but if a patient knows what to expect, he is less apt to move just when you don't want him to, or to jump. This applies even to placing a towel or a saliva ejector. How many times have you had a patient pull away from the latter, thinking it an anesthetic device? "A word in time saves nine." Another rule of good nursing is "*Never leave a patient without giving him some idea of when you will return.*" You may be "*right back*" or the dentist may want enamel to "*set seven minutes,*" but never just leave anyone to hope he may "see you, or the dentist, again sometime."

In moving patients, do not act as though you are afraid to touch them, even if you are. Use the whole hand, or even part of the arm, but not just the fingertips. For instance, in turning a patient's head, if you just touch the mandible with your fingertips, the

patient will invariably only move his jaw. If, however, you place the whole palm of your hand along the side of the patient's head, and ask him to turn his head "*this way,*" you will save much time and energy.

Never have an unlabeled bottle in your office. You may know its contents, and the dentist may know, but what if you are suddenly taken ill? The one who takes your place may have a cold and be unable to smell the difference between phenol and soap solution. We all think we will never be the one to give the wrong medicine, but if you will train yourself always to obey this rule, you will save yourself grief some day, and you may also save a life. "*ALWAYS read the label on EVERY bottle THREE times:* 1. When you pick up the bottle; 2. When you pour from the bottle; 3. When you replace the bottle.

Finally, let us remember that a trained nurse always rises when her superior enters the room. If you were in training in a hospital and didn't pay this respect to whom it is due, someone would add about six weeks to your training, or take away your cap, or something. You may not feel that your dentist or the doctor in the next office is your superior, but if they come into the room where you are sitting, pay respect to their profession, and rise. The foregoing are only a few of the fundamentals observed by well trained nurses. Faithfully adhered to they will improve your technique, make your work easier, and raise you in the esteem of all who know good nursing, be it in the home, the hospital, or the dental office.

Team-Work In Dental Practice

By Bertram B. Machat, D.D.S., Brooklyn, N. Y.

for The Dental Assistants Study Club, 2nd District, N. Y.

AS WE analyze modern dentistry from the standpoint of its usefulness we find our profession one mixed and unique. Its mixed nature is characterized by its multiple services, i.e. management of health, function, comfort, and esthetics. The dentist of today may confine his work to a particular dental service, but, his knowledge must cover the entire field. There is no fine line of demarcation. Oral medicine, surgery and prosthesis are so interwoven with the specialties as to permit of no exception in diagnosis which is the fundamental coordinator of all. Competent dental practice in turn, presupposes the application of these principles in the most expedient manner possible—calling for, not only, knowledge, skill and resourcefulness on the part of the dentist, but a highly developed teamwork between the operator and his assistant—lay or professional. Clearly therefore, where correct teamwork prevails, the role of the efficient nurse-assistant in a highly organized dental practice is of utmost importance; and likewise, one of mixed and various functions.

The efficient assistant is at once the hostess, business manager, and the technician. I say technician for no one word at my command could better describe the limitless technical opportunities which should be hers, and which under patient, generous and competent training may be made that of the average intelligent and capable young woman assistant to the dentist. I feel confident in saying that the operator who would subordinate to the skilled assistant every detail of work in and about the operating room, short of intra-oral work, will double his output of service. Moreover, the assis-

tant is as good as the operator. That is, the competent operator will have no incompetents assisting him; and *he* is competent who can sense the resourcefulness of his assistant and develop it. Teamwork in a dental practice may be applied in many ways, but the teamwork which I especially value most is the kind which, as stated, is the product of generous and patient training in the technical phases of practice.

I am loath to believe that highly competent assistants are rare exceptions; rather I believe, that young women who make dentistry their calling are for the most part, serious minded and fully interested in every phase of the practice. Given a fair chance, the natural trend for detail and finesse of work of an intelligent woman renders her service highly efficient and therefore most valuable. Observe the teamwork between the oral surgeon and his skilled assistant nurse and you will know what I mean. No two men however, learned or skilled could take her place. She minds her business—fulfills her assignments. *That is teamwork.* But there are many other phases of teamwork. At diagnosis for example; in which history taking is of paramount importance, the adroit dental nurse, by patient prodding will elicit the widest information. To her may be subordinated the technique of charting, of roentgenology, of developing and mounting X-rays and modeling of casts. Likewise, her technical training may be extended to blood and bacteriological smears, study and check temperatures, and blood pressure when indicated, and prepare reports while the operator is occupied with other duties.

(Continued on page 15)

The Value of Dental Assistant's Organization

By Dr. R. F. Sullivan, Savannah, Ga.

Read at Georgia State D. A. Meeting, June, 1933

"WHAT kind of a society would this society be if every member was just like me?" Ask yourself this question, then go to work, for after all, the officers of an organization can not make it a success unless they get the support of the big majority of the members. A good organizer may put it over or hold a society together but every member should be a worker to get the best results. If you do not put anything into it you should not expect to get anything out. An organization of this kind should be of great benefit to its members, especially to the young women who are just entering the Dental Profession and to the dentist by whom they are employed. *The fundamental principles of the organization are right*, the constitution and by-laws are very wisely drawn, so if each member will strive to live up to the principles, I will say that the organization has, and will play a most important part in the Profession of Dentistry. You should, indeed, consider it a great honor and privilege to be a member of such a worthy organization.

Without organization there can be very little progress. The larger the organization the more progressive the members will be, because the more interest is created, the more original ideas are offered, and more friendly rivalry is started to see who can do the most to make this or that next meeting better. All of this is progress, and a step forward for your profession. Where would dentistry be today were it not for the wonderful organizations which we dentists have? There are men here today from all parts of this state and many from our neighboring states, who bring new ideas to us,

or who come to learn new and perhaps better ways of administering to those who may call for their services. *"We can never be independent"*. We have to lean on the other man no matter how good we may be, to give us help, and we must be ready at all time to do our bit and help our fellow-practitioners whenever possible.

The wide-awake dental assistant who is truly interested in her work will gather many wonderful ideas from a meeting of this kind to take back to her office and try out, or I should say, present to the Doctor by whom she is employed; he should say whether or not he would care to test them out. What may appeal to you many not to him, but nevertheless if you do not learn something from each meeting which you attend it is your fault. Again, if you do not take it back to your office, you are not fair to your employer, you do not have his practice at heart. If you are not 100% for your office, you should resign and let some worthy girl take your place. This Dental Assistant's Association is in its infancy, being your fourth annual meeting. I believe the Parent Society is about seven years old. You have made wonderful progress in so short a time. When I started in dentistry, I will not say how many years ago, there was only one Dental Assistant in this city and when I commenced the practice of dentistry in 1916, the young lady in my office was the third assistant here, but from then until the present time there has been a steady increase, which is very gratifying because there is nothing which I know of which adds more to the dignity of a dental office or to the profession than a capable, refined young lady assistant.



Question Box*

Elizabeth V. Shoemaker, Kew Gardens, N. Y.



Q. *a. Who owns a set of Radiographs; the patient or the dentist?*

A. Two years ago this question was decided in favor of the dentist. Being sued by a patient for the possession of a set of Radiographs, the dentist was upheld because the court pointed out that not material but knowledge and experience went into the Radiographs. They should be filed and available at all times.

Q. *b. Can a bill for work done for a patient under legal age be collected if neither parent ordered the work done nor agreed to the estimate.*

A. This bill cannot be collected on its legal merits. All work for a minor must be authorized by one or both parents or guardian, and if there is any question as to the possibility of payment, this authorization should be in writing.

Q. *If a Dental Assistant is required to do inlay work, tooth carving, pouring models, and other laboratory work, where does she learn this work?*

A. If the dentist with whom she is employed has the inclination and time, he can teach an assistant these subjects. This is often done where a dentist employs an inexperienced assistant. Otherwise, the laboratories and supply houses patronized by the dentist will usually help, but the best possible way is to become a member of the local Dental Assistants' Society and take advantage of the classes which they give.

Q. *Our X-Ray solutions get too cold and as we do not have a tank with circulating water, what suggestion have you for bringing up the temperature?*

A. If your tank has a space between the container for the developer and fixer, fill it with hot water. Have a thermometer in the developer and place lid on tank. Renew hot water if necessary, but it will only take a few moments to bring the developer up to 65 degrees. If you do not use a tank, place whatever container you use in hot water. Be sure to have two thermometers; one for the developer and one for the fixer. It is almost impossible to use the same one without contaminating the solutions. Use same method with cold water if solutions are too warm.

Do You Know That—

For *overdeveloped* radiographs, soak in water at 65 degrees, for 20 minutes, then immerse in a solution of: Water, 6 ounces; Hypo, $\frac{1}{2}$ ounce, and 20 drops of Potassium Ferrocyanid; maintain this at 65 degrees and place in a tray, deep enough so that it can be rocked gently until negative has been reduced to desired density, then wash in running water for 10 minutes. For *underdevelopment*: Place films in a tray and cover with *intensifier* until films are an even color. Intensifier can be purchased in stock.

Do you know that—

Blood stains are easily removed from white materials by first moistening with water and then applying Dioxegen, and Iodine stains respond to Alcohol, or Ammonia.

Do you know that—

Every member of the Police Department of New York City has been ordered to have his teeth examined by the Department dentist. This

will take a year, four months and eleven days, and is considered a very important part of a policeman's physical fitness.

Do you know that—

All old numbers of Magazines used in the office are most gratefully received by any Hospital. They are a great pleasure to patients unable to buy reading matter and they are wonderful for convalescent children to "cut out."

*We invite our readers to send in questions and suggestions. Personal replies will be sent upon receipt of self addressed and stamped envelope. Data must be received by the 3rd of the month for the issue of the succeeding month. Send to ELIZABETH V. SHOEMAKER, Kew Plaza, Kew Gardens, N. Y.

The TEN Commandments Applied to Our Profession

THOU shalt NOT wait for something to turn up, but thou shalt pull off thy coat, and go to work that thou mayest grow and prosper in thine affairs.

THOU shalt NOT go about thy business looking untidy, for thou shouldst know personal appearances are better than a letter of recommendation.

THOU shalt NOT fail to maintain thine own integrity, nor shalt thou be guilty of anything whatsoever that will lessen thy good respect for thyself.

THOU shalt NOT be discouraged in misfortune, for great is the person who accepts the lemons passed out to them, and uses them to start a "lemonade stand."

THOU shalt NOT covet the other fellow's job, nor his salary, nor the position that he hath gained by his own hard labor, for to him belongeth reward.

THOU shalt NOT fail to live within thine income, nor shalt thou contract to thyself any debts when thou canst not see thy way clear to pay them.

THOU shalt NOT hesitate to say "NO" when thou meanest "NO", for there are times when it is not safe to bind thyself by a hasty judgment.

THOU shalt NOT stoop to slanderous remarks nor harbor ill feelings toward a fallen one, or those who unjustly criticize us.

THOU shalt acquire a sympathetic nature, for being able to place ourselves in the "other fellow's shoes," gives us an understanding heart.

THOU shalt LOVE THY NEIGHBOR AS THYSELF, giving all mankind a square deal. THIS is the last and GREATEST commandment, and upon it hangs ALL the success in the business world.

Above was originally "Eight Commandments In Business". Revised, and read by ANN WALKER before the Atlanta Dental Assistants Assn., May, 1933.

Talking It Over

Edith C. Weinhart, Editor, 835 Medical Arts Bldg., Tacoma, Wash.

A NEW YEAR, a new beginning and a new column. Here is an opportunity to talk over our many problems and troubles, to lend a helping hand to our fellow trustees with suggestions for bigger and better societies. Whew! what an opportunity!!

As you know, the financial affairs of the magazine, THE DENTAL ASSISTANT, have been intrusted to my care and supervision, and I am trying with the help of all you Board Members and the societies in your districts, to make a successful job of it. But I cannot get along without your help and the biggest problem, it seems, is that of the subscription fee of 75c for each member in good standing in the A. D. A. A. Here is what I want you to take up with the societies in your district: At the Ninth Annual Meeting in Chicago in August, 1933, it was *voted upon and accepted* that the A. D. A. A. be the publishers of the DENTAL ASSISTANT.—But in order to finance this magazine at this subscription price it will be necessary to have *every member* of the A. D. A. A. a subscriber to the magazine. Therefore, with the annual dues that are sent in to Ruth Clark (and to no one else) an additional 75c must be sent in for a year's subscription to the magazine. I would suggest the following procedure:—Each member should send in 75c, in addition to her former yearly dues, to her local secretary, who, in turn, will send it on to the State Secretary (if there is a state society), who then sends it to the National Secretary, Ruth Clark, accompanied by six copies of the membership list. (Please make out lists in alphabetical order.) Societies have been sending in subscription money to Zella Eighmy, Mrs. Southard, Gertrude Gehm and myself, in dribs and drabs, and do not seem to understand that their former \$1.00 yearly dues have been increased to \$1.75 to help take care of the publishing of the DENTAL ASSISTANT, our national magazine. *Every* member of the A. D. A. A. becomes automatically a subscriber to the DENTAL ASSISTANT magazine upon the payment of her \$1.75 national dues. In order that the members may *all* start their subscriptions with January, 1934, Zella Eighmy asked for lists of members to be sent her early in December, for addressing purposes, but these are not to be confused with the lists that are to go with payment of dues to Ruth Clark.

What are your hopes and plans for the coming year? I am pretending that my page in my New Year book is wiped clean of all my worries and misdeeds of the past year and I am going to start fresh and try to keep the page clear of blots and blemishes for the coming year. I can hear you protesting: "Why, that is not humanly possible." I agree with you, but *I am going to try* and I am hoping that I can, through my clean page, help someone else to a happier New Year. The best of luck, health, wealth and happiness is my wish for all of you.

KATHERINE CARR,
Sixth District Trustee.

The consciousness of duty performed gives us music at midnight.

—George Herbert.

It is wonderful what strength of purpose and boldness and energy of will are aroused by the assurance that we are doing our duty.—Sir Walter Scott.

A. D. A. A. Official Cap



AT THE Ninth Annual Meeting of the A. D. A. A., held in Chicago, August 7-12, 1933, the discussion relative to the adoption of an official cap, which had been deferred from the 1932 meeting, was held. Each affiliated society had been requested to bring this matter before their members at a meeting during the year, select a cap they preferred, and bring this to the 1933 meeting. The demonstration of the various models brought by the delegates proved a lively one. (Have you ever tried to select a hat [or a cap] that would suit the beauty of some two or three hundred women?)



The favorite proved to be the one brought to the meeting by the Georgia Delegation, and this was unanimously adopted.

So many inquiries have been received as to where it can be bought, etc., it was decided to publish these sketches and information. The cap can be purchased from the Davison-Paxon Co., Atlanta, Ga.; Halle Bros., Cleveland, Ohio; R. H. Macy & Co., New York City, and we are advised that if a sufficient number of members in any city (or nearby) should desire the cap, if they will go to one of their leading department stores with their request, the store will probably be very glad to order them from the manufacturers for them. The cap is known as the Nurse's Cap—Model No. 155; prices vary, but it should not be more than 50 cents.

Miss Ann Ragsdale, with Dr. F. Lamons, of Atlanta, Ga., posed for the illustrations.

The Dental Assistant

A Monthly Publication

A Journal for Dental Assistants Devoted to Their Interests and Education
 Monthly publication of the A.D.A.A. A Journal for Dental Assistants Devoted to their Education and Interests and to the Efficient Conduct of Dental Offices. Publication of all statements, opinions, or data, is not to be considered as an endorsement of same by the magazine or its publishers.

NEW YORK CITY, JANUARY, 1934

EDITORIAL DEPARTMENT

The New Year

WE ARE safely at the beginning of another year, and life beckons to us, offering her gifts; lustrous fruits of knowledge, and strength, and power, from our past experiences and sufferings. Refuse not these gifts, for in them lies deep enrichment for all the coming years. This is a season when we have the opportunity to *Stop! Check! and Go!* We *Stop!* to study what our goal in life has been and what it is to be, for sometimes we reach one goal and then seem to forget there are still other big things for us to do in order to develop and enrich our lives and the lives of our fellow men. We *stop* to study the qualities of character that go to make a happy and successful life.

We *Check!* by self analysis, asking ourselves questions such as:—Are we doing the work we are best fitted for, and are we diligent and efficient in our work? Are we giving the very best of ourselves to life? Are we brave enough to face any danger which may threaten us? These and many more questions should be asked and honestly answered, in order to check ourselves, and know our own inefficiency and condemn our own follies and shiftlessness, so that we may grow in the *good character qualities* which lead to a useful and successful life.

Self analysis helps us to know how high we measure in life; and when we know our measurement, be it high or low, then it is time to *Go.* We *Go!* by putting forth a greater effort to improve our minds or add to our knowledge or skill. A dental assistant will read, study and mentally digest the professional literature which comes to her each month. She will be seriously interested in improvement. She will correct bad habits, buy books, travel, attend conferences, and enrich and brighten her life in other ways. The dental assistant who will buy books purchases for herself a liberal education. Many people ought to invest more in themselves and less in somebody's stocks and bonds. The joy and knowledge you so freely receive from a book will go to the grave with you; come what may, it can never be stolen from you nor will its value ever depreciate. Precious thoughts are our reward for good reading. Thoughts are very precious for they are truly free. We can be put in jail for what we may

do or say, but no human law can ever touch our thoughts, be they good or evil. Yes, there are good and evil thoughts, but if the good ones are kept alive there will never be room for the evil ones. *Victory* is a good thought for the present. Victory over the conditions which we are not responsible for, but are a part of. Healthful thoughts will prove to us that the things that annoy us will be soon past, and if we are big enough they will not affect our character.

"There are three kinds of people in this world, the *Wills*, the *Won'ts* and the *Can'ts*. The *Wills* accomplish everything, the *Won'ts* discourage everything, and the *Can'ts* fail in everything." May all dental assistants join the *Wills* family for they have courage, and nothing which it is their duty to do is too hard for them. The *Wills* finding a stone in their path move it out of the way,—if it is too heavy, they go around it. The *Wills* are a very happy family, treasuring small pleasures. May 1934 be a happy and successful year for all dental assistants everywhere. May we live this year as if it will be our last year on earth.

MARY ELLEN ROSS, 905 Bessemer Bldg., Pittsburgh, Pa.
(Member Pittsburgh Dental Assistants Association)

Notice

THE NEXT issue of the magazine will be a combined one for February and March, 1934. ALL DATA MUST BE IN THE HANDS OF THE VARIOUS EDITORS OF DEPARTMENTS BY THE 10TH OF FEBRUARY. A WEEK'S GRACE FOR THIS TIME—PLEASE NOTE, IT WILL BE APPRECIATED.

We take this opportunity to wish ALL our readers a New Year of GOOD HEALTH, with sufficient WEALTH for HAPPINESS and CONTENTMENT, and we THANK them for their past support, and plead for their continued interest and co-operation. We also express these same wishes for our contributors and staff.—J.A.S., *Editor*.

A New Year's Toast

By Ethel Mack, Elwood, Ind.

A Toast to the girls of the A. D. A. A.,
A Toast to my friends, far and near,
A Toast to those that were gathered in Chicago,
A Toast to those that I may some time know,
A Toast to the girls of long ago of the A. D. A. A.
Friends come and go till life is done, so here is
A Toast to the readers of the DENTAL ASSISTANT.

This and That*

Ethel Whitenton, Memphis, Tenn.

CUPID is running rampant in the Los Angeles D. A. A. Consequently, every girl wishing to retain her independence is hiding in a dark corner. Georgia Prophet, Evelyn Young, and Mildred Pringle have all joined the ranks of matrons . . . Four of their members turned actresses for a benefit Christmas program. A play, "Mrs. Oakley's Telephone," was presented. Pennies thrown at the actresses were given the Sunshine box to help supply food for the poor this year.

Ella B. Ray is now with Dr. D. Stone, Wrightsville, Ga., and oh! how the Atlanta girls miss her.

If you know of any "Classy Ads" don't forget to send them straight to Phoebe Hayes, Advertising Manager, 619 Grant Building, Atlanta, Ga.

We wonder if Mabel Knight, President of the Georgia State D. A. A., will don her checked apron and hair bow and sing "Who's Afraid of the Big Bad Wolf" for us at our next annual meeting?

We are all delighted that Mrs. Juliette Southard is getting back to normal health. More power to her.

Seeking a much needed rest and vacation, Marguerite Brennan, President of Luzerne County Dental Nurses Association, has just returned from a ten day trip and is now ready for a very busy year.

It is gratifying to hear that Ruby Sealock, one of the staunch members of the Omaha Society, has completely recovered from illness.

Jennie C. Lybeck has just celebrated her twelfth anniversary with her office. This is a fine record and the best wishes of all the girls are hers. North Dakota is setting a pace for us.

The Christmas Party was held in the home of Mrs. Laura Magee, in the form of a buffet supper, with the

speaker of the evening acting as Santa with a gift for each member, so writes the Monmouth County, N. J., Walter Winchell.

It is with regret that we learn of the recent illness of our national president, Ruth Rogers. All wish her a speedy recovery.

Christmas parties were much in evidence among our societies. Freda Engle and Viola Fangman were the hostesses for Omaha, Nebr., and Santa was there with a gift for every member. Each year Omaha also plays Santa to a poor family selected by the Visiting Nurses' Association.

The Passaic Co., N. J., D. A. A. also held a delightful Xmas Party and Supper-Meeting on December 11th, at Strebs in Hawthorne, N. J.

Miss Grace Renshaw, organizer of the Cincinnati D. A. A. and a Past President, was honored by being made a life member of the Executive Board recently.

Dorothy Poe, hygienist and member of the C. D. A. A., associated with Dr. E. L. Ball, will appear on the entertainment program of the Ohio State Meeting in Columbus. It seems that she was in Chi.

Miss Lillian Humberg, Miss Doris Meyers and Miss Betty Courtney have gone in strong for horseback riding and can be seen along the beautiful Bridle Paths in Baltimore and vicinity. Good exercise, girls. (Watch those Bridal Paths.)

Miss Edna Leland and Mrs. V. B. Ames, the latter the wife of Dr. V. B. Ames, of Baltimore, served hot chocolate and delicious cake at their meetings. This has been enjoyed and personal mention is made for them, as well as Misses Weiner and Schriener, who have been faithful workers there.

The Portland, Ore., girls have made a beautiful quilt and are raffling it

off at ten cents a chance. Who wouldn't "take a chance" nowadays?

Mrs. Lucille Black, President of Alabama Association, has recovered from the effects of an automobile accident and spent some vacation time in Chi. Lucky girl.

Mrs. Clara D. Bradford, who has so ably represented Alabama at two national meetings, has moved into a beautiful new house, just completed. Dr. Patton says he has heard nothing but plans for the last six months. Who wouldn't be thrilled? We are happy for her and wish her much joy in her new home.

The Birmingham girls enjoyed a party at the home of Louise Dismukes last month. Good Eats—Fun—and a delightful Hostess.

Chatter from Oklahoma is that Tela

Robinson likes her new work with the Oklahoma County Clinic.

Oda Waddell is enjoying a new office in the American First National Bank Building. Lillian Meagher skipped out for a little rest over the week-end to Mangum, Okla.

Mary Hawks, board member for the eighth district, attended the Oklahoma State Dental Assistants Society in November.

From Toledo an announcement is made of the marriage of Lillian Gysin, now Mrs. Herman Kahl, and the engagement of Doryce Russell. Congratulations, girls, and best wishes for happiness. Toledo seems to be needing Los Angeles advice.

Detroit hails two brides—Marie Noran and Verna Scheer. Congratulations! Both are remaining active members.—More congrats!

* All material for this department must be in the hands of *Editor* ETHEL WHITENTON, 906 Exchange Bldg., Memphis, Tenn., by the 3rd of each month for publication in the issue of the month immediately following.



Team-Work In Dental Practice

(Continued from page 6)

Sterilization of instruments, linens and dressings is no mean art or trust. Who is more competent? Similarly, is the care of fine cutting instruments, needles and hypodermics; preparation of chemicals and drugs; the proper care of handpieces; the preparation and draping of the patient, and the care of all details in the operating room. Since our profession is largely manual, modern dentistry requires four—sometimes six hands, not two. These hands must have a central object—namely, the accomplishment of the work, especially delicate operations, in a sterile (so far as possible)

neat, deft and expedient manner. Each one therefore should know the nature of the operation at hand, that initiative may be consistent and not a means of duplication of effort or interference with the others engaged in their job. Further, it should be pointed out that an efficient and sympathetic dental nurse is a definite asset to the dentist, because she inspires added confidence in the patient. One of the most constructive phases in the training of dental nurses should be clinical demonstrations by competent operators in exemplary teamwork with their assistants.

Secretary's Corner

By Ruth M. Clark, Gen. Secty., A. D. A. A., 1-4 Scofield Bldg., Minot, N. D.

I AM a new comer in this magazine and I ask that our members pause here for just a moment to ponder more instructions, note changes in officers' addresses, new officers' names, and other forthcoming items.

Presidents of affiliated societies please note.—A Resumé of the Ninth Annual Meeting of the A. D. A. A. held in Chicago will be in your hands by the time this issue of the magazine is published. It is your duty to read this resumé at your next regular meeting so that the members of your society may have a knowledge of the important events that transpired during the Convention. Extra copies will be sent State Societies for distribution to their local societies. *Please see that this is done.* **THANKS.**

Attention, Secretaries—When remitting dues and subscriptions for THE DENTAL ASSISTANT to your General Secretary please send in *six* copies of members' names in alphabetical order, and addresses instead of three copies as heretofore. This change is necessitated by the additional lists required for the magazine. Your cooperation in this matter will be appreciated by this office. Thanks.

CHANGES IN OFFICERS

Monmouth County, New Jersey, reports a new president:—Miss Margaret S. Hill, 1090 Broadway, Long Branch, N. J.

Miss Marion Webster, who has served as president of the Valley District for two years, is no longer continuing in that capacity. A new president is to be elected soon. Miss Loretta Lawlor, care of Dr. Ryan, Easthampton, Mass., is the newly elected secretary.

Summit County reports a new secretary:—Miss Helen Clymer, 250½ East South Street, Akron, Ohio.

Oklahoma State Dental Assistants' Society, new officers:—Mary Jackson, 405 Surety Building, Muskogee, President; Tela Robinson, 108 West Reno, Oklahoma City, Vice-President; Lucy Ligon, 704 Manhattan Building, Muskogee, Secretary; May Conkright, 604 Medical Arts Bldg., Tulsa, Treasurer.

Memphis, Tennessee, reports the following:—Ethel Whinton, President; Clara Taylor, Vice-President; Ola Lundy, Secretary-Treasurer, 708-10 Exchange Building.

Nashville, Tennessee, new officers:—Flora Ambrose, President (second term); Clara Smith, Vice-President (second term); Willie May Grass, Secretary-Treasurer, 1108 Bennie-Dillon Building.

Wisconsin State, new officers:—Olga E. Kumm, President, 503 State Street, Madison; Alma Prah, First Vice-President, Oshkosh; Mildred Reis, Second Vice-President, Green Bay; Alice Smiley, Secretary, 2008 Atwood Avenue, Madison; Viola Benhke, Treasurer, 718 Zuelpe Building, Appleton.

Grand Forks, N. D., new officers:—Ellen Welsh, President; Lois Stead, Vice-President; Echo June, Secretary-Treasurer.

Indiana State D. A. Assn., new officers:—Ethel Mack, President; Mayme Williams, Vice-President; Maxine Quinn, Treasurer; Mrs. Alice Martz, Secretary, Citizens Bank Building, Kokomo, Ind.

Correction—Miss Helen Marrs, secretary of the Seattle Society, is not spelled Morris as indicated in the 1933 program.

Calendar of Meetings*

Vivian C. Sherman, 1519 Washington Bldg., Tacoma, Wash.

HOW encouraging to start a new enterprise at the beginning of a New Year, with the whole-hearted support of one's fellow-workers! Your new Editor of the "Calendar of Meetings" Department wishes to express her thanks for the many letters of congratulations on her appointment to this position, and also for the many pledges of co-operation received by her. She is anxious to serve you, and is looking forward to her correspondence with you ALL, that she hopes will culminate in many close friendships. May 1934 be a year of PROMISES FULFILLED for the members of the A. D. A. A.—Vivian C. Sherman.

CALIFORNIA

San Diego Co. D. A. Society

Meeting—January 23rd, 1934.

Place—Bank of America Building.

Speaker—Dr. Leo Guichard.

Topic—"Oral Anatomy and Physiology."

Roberta A. Steimke, Chairman
Publicity, 626 First National Bank Building, San Diego.

GEORGIA

1st District D. A. Soc., Savannah.

Meeting—January 8th, 1934.

Place—118 Jones Street.

Besides regular meetings, for recreation, Bowling Teams have been organized, and a class in tap dancing.

5th District D. A. Soc., Atlanta.

Meeting—January 9th, 1934, 6 P. M.

Place—815 Candler Building.

Speaker—Dr. H. M. Davison.

Topic—"Keeping Fit."

The Educational Group has been having a series of talks on "The History of Books" by Mrs. O. Howard,

of the Carnegie Library. Early in January, classes will be held one evening a week, to last for four months, given by Dr. Roy Y. Shaw, on "Anatomy of the Head."—Marie S. Shaw, Chairman Publicity, 810 Candler Building.

ILLINOIS

Chicago D. A. Assn.

Meeting—January 18th, 1934, 8 P. M.

Dinner—At 6:30 P. M.

Place—Medical and Dental Arts Building.

Speaker—To be announced.

New Year's Greetings to all the members of the A. D. A. A.; hope it will be prosperous for ALL, so we may see you in goodly numbers at St. Paul for our Tenth Anniversary Convention.—Nancy E. Johnson, Publicity Chairman, 603 Main Street, Evanston.

MARYLAND

D. A. Assn. of Maryland

Sends Greetings and a Happy New Year to ALL. Plans for a big clinic meeting where a number of the members will present phases of "DENTAL ASSISTANCE" are being made, and it is hoped these can be given before the dental society later in the year.—Lillian C. Humbert, President, 2912 Rueckert Avenue, Baltimore.

NEBRASKA

Omaha D. A. Society

Meetings—January 9th and January 23rd, 1934.

A class in "Porcelain Work" will be started under the supervision of Dr. J. Mark Prime.—Mary Haney, President, 2210½ Military Avenue.

NEW YORK**E. & E. Society for D. A., 1st District.**

Meeting—January 9th, 1934, 7:45 P. M.

Place—Offices of E. R. Squibb & Sons, 745 Fifth Avenue, New York City.

Speaker—Dr. J. A. Salzmänn.

Topic—"The Dental Assistant in Orthodontia."

Round Table discussion on "Drugs and Medication in Dental Practice" at close of regular program, by the Clinic Club.—Esther Kahn, Chairman Publicity, 440 East 6th Street, New York City.

D. A. Study Club 2nd District

Study Class Meeting—January 5th, 1934, 8 P. M.

Place—Second District Dental Society, Clinic Rooms, 62 Hanson Place, Brooklyn, N. Y.

Speaker—Dr. Clyde Gearhart.

Topic—"Pyorrhea."

Regular Meeting—Same place as above, January 19th, 1934, 8 P. M.

Speaker—Capt. James Ayers, Police Department.

Topic—"Missing Persons."

A cordial invitation is extended to all who may be interested to attend this meeting.—Marguerite W. Simpson, President, 103 Pierrepont Street, Brooklyn, N. Y.

OHIO**Cincinnati D. A. Assn.**

Meeting—January 26th, 1934, 7 P. M.

Place—Hotel Gibson, Clubroom A. Annual Election and Installation of Officers.

Lecture—January 5th, 1934, 7:30 P. M.

Place—Medical-Dental Suite, Union Central Building.

Lecturer—Miss Marie Boynton.

Topic—"Current Events."

Card Party and Dance—January 13th, 1934.

Place—Hotel Gibson Ballroom.

Committee—Mary Connolly, Chairman.

This function is for the benefit of the Delegates' Fund, and has been held for four years as an Annual Social Function, with great success. It is hoped to have it bigger and better this year.—Helene Meyers, President, 6019 Madison Road.

OREGON**Portland D. A. Society**

Sends Greetings for a Very Happy New Year.

Meeting—January 2nd, 1934, 7:15 P. M.

Place—622 Selling Building.

Harriett Hamann, Chairman Publicity, 1003 Selling Building.

PENNSYLVANIA**Philadelphia Assn. of Dental Nurses**

Meeting—January 16th, 1934, 8 P. M.

Place—Rittenhouse Hotel, Dental Clinic Club Rooms.

Speaker—Dr. L. E. Kocher, of South Orange, N. J.

Topic—"What I Expect of a Dental Assistant."

A Class in "Parliamentary Procedure" will be formed early in January. To all members of the A. D. A. A., best wishes for a Happy and Prosperous New Year.—Sarah Hood, President, 116 Chestnut Street, Philadelphia.

Pittsburgh D. A. Assn.

Meeting—January 9th, 1934.

Place—Assembly Room, Jenkins Arcade.

Speaker—Mr. William Benshoff.

Topic—"Gold and Gold Refining."

A class in "Dental Anatomy" is being organized by Sara Metzger, Chairman Educational Committee. — Roberta Grossman, President, 1227 Sandusky Street.

TENNESSEE**Memphis D. A. Society**

The new officers will be found in the General Secretary's Corner on Page 16 of this issue.—Elizabeth Mays, Publicity Chairman, 1308 Sterick Building.

Nashville D. A. Assn. (5th District)

The new officers will be found in the General Secretary's Corner on Page 16 of this issue.—Flora Ambrose, Publicity Chairman, 605 Medical Arts Building, Nashville.

WASHINGTON

Seattle District D. A. Assn.

Program, for January Meeting—*Clinic* on "Gold Foil," by Mary Thatcher,

Paper on "Collections," by Hazel L. Dresser,

Display of "Tooth Carvings" by Elinore Weiss, Elizabeth Forsythe, Florence Zewirs, and Mary Thatcher.

Refreshments served, which affords an opportunity for closer acquaintanceship. Two members are responsible for this feature at each meeting. As a STUDY CLASS many of the members have taken the Red Cross Class on First Aid.—Hazel Dresser, Chairman Publicity, 818 Cobb Building.

Tacoma D. A. Society

Meeting—January 4th, 7:30 P. M.

Place—Medical Arts Building.

Speaker—Dr. Harold N. Fowler.

Topic—"The Assistant De Luxe."

Demonstration—"Care of the Type-

writer," by Mr. C. A. Morey, of Remington Rand, Inc.

Clinic—"Simple Tests for Blood Coagulation," by Katherine Churchill.

Entertainment and Refreshments by Helen Sjolander and Erna Weller.

Vivian C. Sherman, Chairman Publicity, 1519 Washington Building.

Walla-Walla Valley D. A. Assn.

Meeting—January 9th, 1934.

Program—Table Clinic, "Dental Surgical Packs," by Gladys Siverling.

Paper, "Office Management," by Hil-dred Egbert.

This society meets twice a month, continuing the Study Club and Business Meetings. — Dorothy McLeod, President, 509 Baker Building.

Yakima D. A. Society

Meeting—January 2nd, 1934.

Place—Miller Building.

Speaker—Dr. William Clark.

Topic—"Dietetics."

Lodema Brown, Chairman Publicity, 423 Miller Building.

WISCONSIN

Wisconsin State D. A. Assn.

The new officers will be found in the General Secretary's Corner on Page 16 of this issue.—Mildred Mertz, Chairman Publicity, National Bank Building, Fond Du Lac, Wis.

*All the data for this department must be of current value and must be in the hands of the Editor by the 3rd of the previous month.

The Steps

The easy roads are crowded,
And the level roads are jammed.
The pleasant little rivers
With drifting folks are crammed;
But over yonder where it's rocky,
Where you get a better view
You will find the ranks are thinning
And the travelers are few.

Where the going's smooth and pleasant
There you'll always find the throng.
For the many, more's the pity,
Seem to like to drift along;
But the steps that call for courage,
And the task that's hard to do,
In the end result in glory
For the never-wavering few.

—Edgar A. Guest.

YOU KNOW (Not Guess) When CAULK CEMENT SETS 2 TO 4 MINUTES IN THE MOUTH —as you prefer . . .

Caulk has recently perfected a new RAPID liquid and made other major improvements in the powder which still further widen the gap between Caulk and other cements. These radical improvements reduce the setting time in the mouth to 2 minutes. Those who prefer a fast-acting cement will find their ideal in this new Caulk Rapid Liquid. If you prefer a more leisurely setting in the mouth, say 4 minutes, Caulk's MEDIUM Liquid will give equal satisfaction. Caulk Cement meets either requirement . . . for average setting or extremely fast.

Below are the labels which identify the setting time as a guide to the Dentist:

CAULK CEMENT
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Slab 8 Min.
Mouth 4 Min.
MEDIUM

CAULK CEMENT
Average Setting
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Mouth 2 Min.
RAPID

No dentist nor his assistant need now have any grief in mixing Cement if he "Follows the Caulk Label." Caulk also places a "Setting Time" label on its bottles of Synthetic Porcelain.



Caulk is the only Company that guarantees the setting time of its plastics and indicates it on the labels.



CAULK SnoWhite Cement—

ONE FULL PORTION \$2.00
POWDER AND LIQUID
POWDER OR LIQUID \$1.00

It is invariably indicated for blending with other shades of Crown and Bridge Cement, to lighten the color and produce the exact shade desired. It is also indicated for cementing Steele's Facings, Porcelain Jacket Crowns and Inlays—it eliminates the dark shadow of a metal filling.

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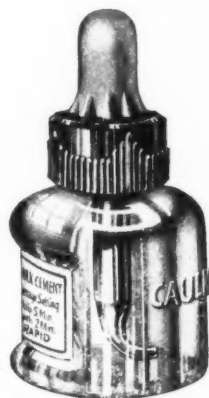
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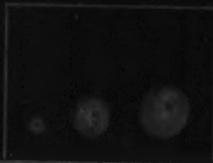
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You unquestionably agree with us that serious consequences are likely to follow neglect of the teeth. Your patient and the public are entitled to this information, but they need not live in constant fear.

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of the gums — by *safe cleaning*, not by the use of dangerous astringents or any other irritating substances. And its use is true economy.

When your patients use Squibb Dental Cream, tiny particles of Milk of Magnesia are forced into sheltered areas to neutralize bacterial and other acids which result from food decomposition.

Let us send you a sample of Squibb Dental Cream for your personal use. We know you will enjoy its delightful flavor and the clean, refreshed feeling it leaves in your mouth. And you will have no doubt about recommending it to your patients, for you can trust its complete safety and efficacy.

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